



INEQUALITY MAGNIFIED:

SUBMISSION TO THE AUSTRALIAN SENATE INQUIRY INTO
AUSTRALIA'S RESPONSE TO COVID-19

CONTENTS

Executive summary	3
The voice of LGBTIQ+ communities: Key concerns during COVID-19	9
Overall sentiment and wellbeing.....	9
Key worries and struggles.....	9
Particular issues	16
1. Employment and financial impacts.....	16
(a) Employment and unemployment pre and post COVID-19	16
(b) Income pre and post COVID-19.....	18
(c) Concerns about financial issues	20
(a) Key take outs for Australia’s response to COVID-19	21
2. Mental health.....	21
(a) Mental health challenges due to COVID-19.....	22
(b) LGBTIQ+ people have been excluded in the mental health response.....	24
(c) Key take outs for Australia’s response to COVID-19	24
3. Safety at home and family violence	25
(a) Not all LGBTIQ+ people feel safe at home	25
(b) Domestic and family violence.....	25
(a) Key take outs for Australia’s response to COVID-19	26
4. Access to healthcare	27
(a) Delays in treatment.....	27
(b) Avoiding treatment	28
(c) Key take outs for Australia’s response to COVID-19	29
5. Disability and care needs.....	29
(a) Access to care needs	29
(b) Key take outs for Australia’s response to COVID-19	31
6. Caregiving.....	31
(a) Caregiving by LGBTIQ+ people.....	31
(b) Key take outs for Australia’s response to COVID-19	33
7. Border closures and familial separation.....	33
(a) Separation of couples and families	33
(b) Key take outs for Australia’s response to COVID-19	34
8. Viability of LGBTIQ+ institutions and community organisations	34

(a) The LGBTIQ+ sector in Australia	34
(b) Key take outs for Australia’s response to COVID-19	35

ABOUT EQUALITY AUSTRALIA

Equality Australia is a national LGBTIQ+ organisation dedicated to achieving equality for LGBTIQ+ people. Equality Australia has been built from the Equality Campaign, which ran the successful campaign for marriage equality, and was established with support from the Human Rights Law Centre.

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We acknowledge that our offices are on the land of the Kulin Nation and the land of the Eora Nation and we pay our respects to their traditional owners.

With special thanks to our volunteers and the Nous Group for their contribution to the analysis of our survey data.

Cover image: ‘Yes’ Announcement, Melbourne, 15 November 2017.

CONTENT WARNING:

This document includes content regarding suicide, self-harm and family violence. If this content triggers something for you, you can contact [Lifeline](#) (crisis support and suicide prevention) on 13 11 14 (24 hours / 7 days), [QLife](#) (LGBTI peer support and referral) on 1800 184 527 (3pm-midnight, 7 days), [1800Respect](#) (national sexual assault, domestic and family violence counselling service) on 1800 737 732 or [Kids Helpline](#) on 1800 55 1800 (for 13-25 year olds).

EXECUTIVE SUMMARY

Equality Australia welcomes the opportunity to provide this submission to the Australian Senate Select Committee Inquiry into the Australian Government's response to the COVID-19 pandemic.

In many ways, Australia's response to COVID-19 must be commended. Our rates of infection and the deaths resulting from COVID-19 have been among the lowest in the world, though sadly lives have still been lost. The people of Australia must be acknowledged for their part in reducing the spread of COVID-19, despite the enormous personal sacrifice it has entailed to their mental health and economic security. Australians have again shown that they are fair-minded, practical and decent, and strongly believe in a society that leaves no one behind.

As a national organisation working to redress discrimination against LGBTIQ+ people, COVID-19 presents a new challenge in achieving equality for Australia's LGBTIQ+ communities. In facing that challenge, we are mindful however that LGBTIQ+ people have weathered health crises before and emerged stronger together on the other side. LGBTIQ+ people have also helped to build a more equal Australia in the face of adversity and discrimination.

Through an online survey conducted between 24 April to 18 May 2020, we consulted directly with LGBTIQ+ people regarding the impacts of COVID-19 and its associated restrictions on their lives. We received over 2,600 responses from LGBTIQ+ people across Australia. Our submission reports on our first survey findings and recommends improvements to Australia's response to COVID-19 going forward, based on the voice of our communities.

We will be continuing and releasing further analysis from our survey, particularly on segments within our LGBTIQ+ communities such as older people, parents, and people from culturally and linguistically diverse backgrounds.

THE IMPACTS OF COVID-19 ON LGBTIQ+ PEOPLE

Our survey results confirm that, when it comes to COVID-19 and Australia's response, LGBTIQ+ people have experienced some unique and more acute impacts from COVID-19 because of discrimination, disparities and differences connected to our LGBTIQ+ status. These issues are in addition to the obvious challenges faced by us and many others in Australia, such as the job losses, isolation, and loss of access to our culture and communities.

The Australian response to COVID-19 has, for the most part, been blind to discrimination against LGBTIQ+ people, and the disparities we already face. COVID-19 has therefore been allowed to magnify existing inequalities, particularly in employment, mental health, access to inclusive services, and in finding welcoming and safe spaces. When an LGBTIQ+ status is coupled with others, such as disability, Indigeneity, age and temporary or migrant status, the negative impacts of COVID-19 and its associated restrictions considerably multiply.

This submission gives voice to the LGBTIQ+ people of Australia: their key concerns and worries regarding COVID-19 and the government and community response to it, and prominent issues arising from our survey results.

Australia must tailor its response to COVID-19 and the recovery from it to ensure that no one is left behind.

OUR COVID-19 SURVEY

In this submission, we set out the first results from our survey on the impacts of COVID-19 on LGBTIQ+ people in Australia. The survey, consisting of over 2,600 responses from LGBTIQ+ people in Australia, represents the largest survey of its kind.¹ It provides evidence for the ongoing need to address discrimination against LGBTIQ+ people wherever and whenever Australian governments deliver programs and policies. That discrimination

¹ A total of 3,391 responses was received to our survey, with 3,264 indicating an Australian postcode. This submission reports on the responses received from the 2,631 people in Australia who identified as lesbian, gay, bisexual, queer or another sexual orientation other than straight/heterosexual, and/or who indicated they were trans, gender diverse or intersex.

unfortunately begins with the failure of the Australian Government to collect meaningful data about employment and LGBTIQ+ households through the Census. In the absence of data informing the Government's interventions and monitoring its impacts, we have collected the data ourselves.

KEY STATISTICS

Unemployment: LGBTIQ+ unemployment rose from 7.5% pre COVID-19 to 12.7% post COVID-19. Trans and gender diverse unemployment rose from 15.2% to 20%.

Income loss: Almost 1 in 3 LGBTIQ+ people have some lost income since COVID-19 restrictions, with almost 1 in 5 LGBTIQ+ people reporting having lost more than half or all of their income.

Mental health: Of the 13% of LGBTIQ+ people who reported living with a mental health issue, around 4 in 5 of them say they are more lonely now or feel low or flat because of COVID-19 restrictions.

Safety at home: Around 1 in 20 LGBTIQ+ people have experienced violence, abuse, harassment or controlling behaviour in the last 12 months from someone they currently live with, or live with someone they fear may be violent, abusive or controlling towards them.

Care needs: Around half of LGBTIQ+ people who receive personal or domestic care were affected in getting the care they need by COVID-19 and its restrictions.

Caring responsibilities: Around half of LGBTIQ+ caregivers experienced an increase in their caring responsibilities because of COVID-19 and its restrictions.

Border separations: Up to 1 in 20 LGBTIQ+ partners are physically separated by interstate or international border closures.

While our survey analysis continues, the first results include that:

- **LGBTIQ+ people are overrepresented among the unemployed**, having experienced rates of unemployment *both* pre and post COVID-19 which are higher than the national unemployment rate. Trans and gender diverse people are particularly overrepresented in this regard. LGBTIQ+ people, like many people in Australia, are extremely concerned about the impacts of COVID-19 on their financial situation.
- **Mental health disparities for LGBTIQ+ people have been exacerbated by COVID-19 and its associated restrictions.** These health needs have not been met with an adequate response by the Australian Government.
- **LGBTIQ+ people with domestic and personal care needs have suffered profound and immediate impacts from their inability to access the care they need**, while LGBTIQ+ caregivers have stepped up to provide more unpaid care to their family and friends during COVID-19.
- **LGBTIQ+ partners are among those who are physically separated from their family and friends by interstate and overseas border restrictions.**
- **Discrimination and prejudice against LGBTIQ+ people has contributed to and amplified the adverse impacts of COVID-19.** For example, stay-at-home restrictions and financial insecurity have been particularly harsh for LGBTIQ+ people who do not live in safe and accepting homes. LGBTIQ+ people do not always feel confident in accessing the healthcare and support services they need because those services are, or are perceived to be, discriminatory. LGBTIQ+ people, who feel isolated and disconnected, are less able to access the people, LGBTIQ+ communities and organisations that support them.

CONSULTATION WITH FRONTLINE SERVICES AND ORGANISATIONS

At the beginning of the pandemic, we convened a roundtable of over 40 LGBTIQ+ and allied organisations to discuss the impact of COVID-19 on LGBTIQ+ people in Australia. Many of the issues identified at the beginning of the pandemic in our report, [LGBTIQ+ Communities and COVID-19](#), have unfortunately been borne out in the survey results. These include:

- **Mental health:** The closure of community and cultural spaces, coupled with job losses and restrictions, have exacerbated mental health disparities among LGBTIQ+ people.
- **Social isolation and dislocation:** The challenges of physical separation have fallen heavily on people in particular situations and groups in which LGBTIQ+ people are represented or overrepresented, such as people living alone, people in unsupportive or unsafe households, people with disability or mental health issues, people at greater risk of infection, people living in aged care facilities, and people who are homeless or at risk of homelessness.
- **Financial disadvantage:** Trans and gender diverse people and LGBTIQ+ people overrepresented in industries heavily impacted by COVID-19 restrictions have faced higher unemployment and financial insecurity.
- **LGBTIQ+ family violence:** LGBTIQ+ people living in unsafe or hostile environments have been at greater risk of violence and less able to access support due to restrictions.
- **LGBTIQ+ community organisations:** While the LGBTIQ+ community sector has shown great leadership and creativity, and taken great strides to adjust to COVID-19, the viability of this already fragile, fragmented and underfunded community sector remains unaddressed.
- **Human rights and discrimination:** The discriminatory effects of certain laws (such as those regarding the ability to change gender markers and anti-discrimination exemptions for faith-based service providers) have continued to be felt, while threats to the human rights of LGBTIQ+ people (such as the Religious Discrimination Bill) remain and have intensified the anxiety felt by many.
- **Compounding disadvantages:** The impacts and consequences of COVID-19 have been further compounded and magnified for those with additional needs based on other attributes, such as disability, age and temporary or migrant status.

Thankfully, some of the issues we foreshadowed at the beginning of the pandemic – particularly, the public health impacts from an overrun health system, and the grief associated with COVID-19 related deaths for surviving partners, family members and friends – have not been borne out, thanks to Australia’s successful response in reducing the spread of COVID-19 to date. Nevertheless, many LGBTIQ+ people remain nervous about the future, how society will recover and the ongoing potential for increased rates of COVID-19 infection.

KEY PRINCIPLES FOR GUIDING AUSTRALIA’S RESPONSE TO COVID-19

In our report, [LGBTIQ+ Communities and COVID-19](#), we highlighted the need for four key principles to inform Australia’s response to COVID-19 so that no one is left behind. Those principle remain relevant for Australia’s response to COVID-19 going forward.

The principles are:

- **Principle 1:** The response to COVID-19 must comply with Australia’s human rights obligations, including with respect to LGBTIQ+ people in Australia or within our care and control.

- **Principle 2:** The response to COVID-19 must meaningfully take into account the specific needs and circumstances of LGBTIQ+ people and communities, especially people who may be socially or economically marginalised or at greater risk from COVID-19 or its impacts.
- **Principle 3:** Economic stimulus must recognise the impact of COVID-19 on LGBTIQ+ people and communities in Australia, including our unique and few-in-number organisations, businesses and venues.
- **Principle 4:** Responses must work with us, and where possible, should be led by us.

To address the ongoing disparities experienced by LGBTIQ+ people due to COVID-19, all Australian governments must ask themselves whether their COVID-19 policies and programs meet these principles, and adjust their responses accordingly.

OUR RECOMMENDATIONS

Informed by the results of our survey and our consultation with LGBTIQ+ and allied community organisations, we make the following recommendations regarding Australia's response to COVID-19 going forward.

COVID-19 restrictions and response

1. **COVID-19 restrictions must be subject to ongoing review to ensure they comply with Australia's human rights obligations.** Incursions on civil liberties must be strictly necessary and proportionate to the legitimate purpose of responding to the COVID-19 public health crisis. COVID-19 restrictions, while enjoying some support and acceptance from a significant number of LGBTIQ+ people, have also taken a heavy personal toll on many. Ongoing support for the restrictions will depend on them being clear and consistent, justified by public health concerns, and that they do not result in greater inequality or involve people being left behind.
2. **LGBTIQ+ people and organisations must be directly consulted in the Government's formulation of COVID-19 policy responses, especially in areas such as employment, mental health, and community and support services.** While government responses have been necessarily reactive and fast-moving to date, as the policy agenda shifts towards medium- and longer-term recovery for society and the economy, LGBTIQ+ people and organisations must be included at the table.
3. **LGBTIQ+ people must be identified and included correctly in COVID-19 research and policy projects.**
4. **The Australian Census should include appropriate and voluntary questions on sexual orientation, gender identity and intersex status.** Without this data, the ongoing disparities in employment and health facing LGBTIQ+ people are not being properly counted or taken into account in formulating and delivering government policy and programs.

Employment and income

5. **In consultation with the trans and gender diverse community, formulate and implement an employment strategy to address barriers to employment for trans and gender diverse people.** The strategy should include research into barriers to workplace participation for trans and gender diverse people and establish employment programs that support employment for trans and gender diverse people.
6. **The Government must outline its plan for income support beyond September 2020.** That plan should include continuing, and expanding eligibility, to existing financial support for those who are unable to work or obtain employment due to COVID-19, and at the very least should provide certainty so that people can make plans regarding their financial circumstances.

Mental health

7. **LGBTIQ+ people must be included as a vulnerable group in the COVID-19 mental health response plan and in suicide prevention initiatives.** Additional funding is necessary to support the increased demand for LGBTIQ+ organisations who provide mental health support for LGBTIQ+ people.

Domestic and family violence

8. **In consultation with LGBTIQ+ community organisations, develop a national LGBTIQ+ domestic and family violence strategy that builds on the work being undertaken in Victoria.** That strategy needs to, among other things:
 - a. ensure financial security and independence for people seeking to escape violence;
 - b. ensure mainstream service providers are inclusive and welcoming of LGBTIQ+ people and equipped to respond to LGBTIQ+ people who experience domestic and family violence;²
 - c. fund specialist family violence services that are operated by LGBTIQ+ community organisations for the LGBTIQ+ community;
 - d. include measures directed at primary prevention and primary drivers of violence, including addressing prejudice towards LGBTIQ+ people that continues to inform the domestic and family violence experienced by some LGBTIQ+ people;
 - e. fund research into LGBTIQ+ family and domestic violence and the effectiveness of responses;
 - f. ensure laws and policies support LGBTIQ+ inclusive service delivery, including removing exemptions in anti-discrimination legislation allowing faith-based service providers to discriminate based on sexual orientation, gender identity and intersex status.

Access to healthcare

9. **Develop a public health plan encouraging and giving comfort to people to seek the healthcare they need despite COVID-19.** The public health plan should include:
 - a. public education to address concerns regarding COVID-19 transmission in healthcare settings;
 - b. putting in place, and communicating, accessible arrangements allowing people to travel overseas and interstate for medical treatment which is not available to them at home, including due to cost;
 - c. in consultation with the trans and gender diverse community, specific communications which speak to the needs and experiences of trans and gender diverse people seeking gender affirming medical treatment.
10. **In consultation with LGBTIQ+ community organisations, develop a specific strategy to tackle discrimination (and the perception of it among LGBTIQ+ people) in healthcare.** That strategy should include an easy way for LGBTIQ+ people to identify and access welcoming and affirming healthcare providers, and LGBTIQ+ inclusivity training for all healthcare providers.

Disability and care needs

11. **Ensure that people with disability and their advocates remain involved as key architects in all areas of the COVID-19 response.**

² For an example of this may be done, see the National LGBTI Health Alliance's [Silver Rainbow LGBTIQ Ageing & Aged Care](#) program which provides national coordination and LGBTI awareness training to the aged care sector with the support of the Commonwealth Department of Health.

Caregivers

12. **Ensure that COVID-19 restrictions, and communications regarding those restrictions, use language which speaks to the diversity of familial and care networks in Australia.** New Zealand has adopted terminology such as ‘the people in your bubble’ which can be clearer to understand and implement when people have significant caring relationships with others who are neither part of their family or household.

Border closures

13. **Implement and communicate a plan on border closures with clear information on accessible reunification pathways if interstate and overseas borders are to remain closed for the longer term.** Australian borders should not be closed to family members any longer than is strictly necessary to preserve public health.

Viability of LGBTIQ+ institutions and community organisations

14. **In consultation with LGBTIQ+ organisations and institutions, implement an economic recovery plan for LGBTIQ+ organisations, businesses and venues.** The LGBTIQ+ community relies on a few organisations, businesses and venues to sustain LGBTIQ+ support, culture and community. Some of these organisations rely on gatherings to be commercially viable, which in turn provide space and fundraising opportunities for other community organisations. Our organisations, business and venues must be part of recovery planning and targeted economic stimulus aimed at preserving key cultural and community meeting places and services.

THE VOICE OF LGBTIQ+ COMMUNITIES: KEY CONCERNS DURING COVID-19

Through our survey, we sought to gauge LGBTIQ+ people's sentiments, feelings and opinions regarding COVID-19 and the government and community response to it. LGBTIQ+ people have differing levels of satisfaction with the Australian government response to COVID-19. LGBTIQ+ people are most worried about or struggling with the impact of COVID-19 on society generally, disconnection and isolation, inequality (a concern that people are being left behind), personal financial issues, concerns regarding the risk of COVID-19 infection, and a fear that governments will not do the right thing by people.

OVERALL SENTIMENT AND WELLBEING

To measure LGBTIQ+ people's current feelings, sentiments and senses of safety and emotional wellbeing during COVID-19, we sought broad agree/disagree responses to 7 statements. While statements dealing with emotional wellbeing, confidence in the future, safety at home and community connectedness elicited stronger responses in one direction or the other, LGBTIQ+ people were much more divided on the question of whether they felt supported by the government through this COVID-19 crisis.

TABLE 1: LGBTIQ+ COMMUNITY SENTIMENT AND WELLBEING DURING COVID-19

Note: Figures are reported by the number of people and by the number of people as a percentage of the total people who responded to the question. Percentages are rounded to the nearest 0.1%.

STATEMENT	STRONGLY AGREE		AGREE		NEITHER AGREE NOR DISAGREE		DISAGREE		STRONGLY DISAGREE	
I feel more lonely now because of the COVID-19 restrictions.	675	27.7%	903	37.0%	398	16.3%	329	13.5%	135	5.5%
I feel confident about the future.	164	6.7%	581	23.9%	572	23.5%	800	32.9%	313	12.9%
I feel safe at home.	1065	43.9%	977	40.3%	208	8.6%	127	5.2%	48	2.0%
I feel connected to my community.	113	4.6%	627	25.7%	631	25.9%	790	32.4%	275	11.3%
I am worried about the impact of COVID-19 on the people I care about.	967	39.6%	1157	47.4%	203	8.3%	91	3.7%	23	0.9%
I feel low or flat because of the COVID-19 restrictions.	695	28.5%	914	37.5%	415	17.0%	298	12.2%	118	4.8%
I feel supported by the government through this COVID-19 crisis.	140	5.7%	697	28.6%	747	30.6%	479	19.6%	378	15.5%

KEY WORRIES AND STRUGGLES

We also asked respondents an open question about what (if anything) they were worrying about or struggling with when thinking about COVID-19 and the government and community response to it. By coding the 1,894 responses that we received to this question thematically, we have identified the key worries and struggles appearing across the responses. These are set out below.

TOP SIX WORRIES AND STRUGGLES

The following themes were most commonly raised by LGBTIQ+ people, appearing in at least 1 of every 10 responses.

Impact on society

LGBTIQ+ people are worried about or struggle with the impact of COVID-19 on our society generally. In this regard, LGBTIQ+ people were not necessarily worried for themselves but the impact of COVID-19 on the health and financial wellbeing of others, including job losses, the loss of the arts, mental health impacts on others, and whether (and how) society will recover from the crisis.

25-34 YEAR OLD LESBIAN...

"... NO mention of the arts by the government. Knowing that the arts were one of the first things to be shut down and will be one of the last things to re-open."

45-54 YEAR OLD GAY MAN...

"... Loss of community. Loss of money for many people and the financial impact on people."

Disconnection and loneliness

LGBTIQ+ people are worried about and struggling with isolation, loneliness and disconnection from friends, family and community. Some spoke of the difficulties of physical separation from a partner living interstate or overseas. Others felt a broader sense of disconnection from their communities, including the LGBTIQ+ community. A significant number of LGBTIQ+ people live alone and some report feeling lonely. Many miss social contact, including intimacy and/or sexual contact. A sense of disconnection and/or loneliness was sometimes raised in connection with mental health and the effect of restricted freedoms, such as the inability to go to the gym or see friends. Mental health is further discussed at 2. *Mental health* below.

25-34 YEAR OLD GAY MAN...

"not being able to be with friends who are my real family"

25-34 YEAR OLD QUEER NON-BINARY PERSON...

"Lack of contact with anyone. I'm single and haven't had a hug in months."

Inequality

LGBTIQ+ people are concerned that people are being left behind, particularly in the financial support which has been provided by the government in response to COVID-19. Respondents expressed concern for people with disabilities, refugees and migrants with uncertain status, victims of domestic violence, and people trapped in homophobic or transphobic environments. Again, many people were expressing this concern for others, not necessarily themselves.

18-24 YEAR OLD QUEER PERSON...

"...I worry daily for those in less safe living arrangements than myself, without secure income (my partner still has their job). People who are trapped in isolation with abusive family or partners. I am worried about people with disabilities not receiving financial support during this time."

55-64 YEAR OLD GAY MAN...

"How some people are still falling through the cracks as far as community assistance e.g. refugees (some of whom are LGBTI+)"

45-54 YEAR OLD GAY MAN...

"Many workers in the Arts are being left out of emergency income supports, as well as casuals generally who do not meet the 12 month test. We should not feel satisfied that some people are being left behind."

25-34 YEAR OLD QUEER NON-BINARY PERSON...

"The less visible disproportionate impact on marginalised communities - no or insufficient tailored support for Indigenous communities, ppl with disabilities, migrant communities and LGBTIQ + people - especially younger people."

Personal financial issues

Many LGBTIQ+ people are worried about their financial situation. Their responses often shared concerns about money, losing their jobs, their ability to find employment, or the long-term security of their current employment. These concerns were sometimes coupled with a concern regarding the inadequacy of government financial support. Employment and financial impacts are further discussed at *1. Employment and financial impacts* below.

55-64 YEAR OLD LESBIAN...

"When I will work again. If I can't resume casual childcare work I am not qualified for anything else and my age will make it hard yo [sic] get into other employment."

COVID-19 risk of infection and second wave

LGBTIQ+ people are worried about the risk of COVID-19 infection, either for themselves or their friends and family (particularly the elderly or immunocompromised). A significant number also share fears that there will be a risk in infections, or a 'second wave'. For this reason, a number of LGBTIQ+ people are concerned about restrictions being lifted too early, or that people are not complying with restrictions/taking them seriously.

25-34 YEAR OLD BISEXUAL...

"As someone who's immunocompromised, I'm scared by the relaxed attitudes some people have towards social distancing."

35-44 YEAR OLD TRANS GAY MAN, HEALTH CARE WORKER...

"Worries that people won't last the distance (people will start socially interacting again too soon or won't follow precautions) and disease will flare up again."

25-34 YEAR OLD NON-BINARY BISEXUAL...

"worrying about my mum and sister getting the virus. Both have compromised immune systems."

Governments failing to do the right thing

While many LGBTIQ+ people commented favourably (and sometimes with surprise) on the response of Australian governments to the COVID-19 crisis, some were concerned that governments would soon return to 'business as usual', either using COVID-19 as an excuse to neglect broader issues requiring attention, such as climate change, or winding back financial support prematurely and imposing financial austerity before the economy and society fully recovered. There was a concern among some of governments putting the economy before people.

LGBTIQ+ people are also worried about the winding back of civil liberties and rights, particularly in the shadow of the current crisis. Concerns were raised about the Religious Discrimination Bill being progressed in the midst of a healthcare and employment crisis. A few people were also concerned about overpolicing and encroachments on privacy, including in relation to the COVID-19 government app.

35-44 YEAR OLD QUEER WOMAN...

"I worry that the govt will prioritise opening up everything except the arts, that my industry will take a long time to recover. And I worry that this government's policies are very much focused on supporting those with existing power - big business, landlords etc - and that those who are marginalised will suffer the most. I worry that they will use the expenditure during the crisis to justify huge cuts to services afterwards, including the arts and the ABC."

25-34 YEAR OLD GENDERQUEER PERSON...

"Financial Security, being afraid that after all this is over new support options are rolled back and the world is getting colder again"

25-34 YEAR OLD QUEER TRANS MAN...

"I am worried about being forced to look for work when there is little available, and worried about money. In October when the rate of Newstart halves I will be unable to eat and pay my bills, and will have to go back to rationing my medication again."

OTHER COMMON WORRIES AND STRUGGLES

Though less frequent than the themes above, the following concerns were also shared by many LGBTIQ+ people, appearing in at least 1 in every 20 responses.

Uncertainty

Many LGBTIQ+ people are merely worried by the uncertainty: the inability to know what will happen next or plan for the future. Sometimes, concerns of uncertainty were tied to concerns of future income and job security. The more certainty governments can provide on the plan forward, the better.

25-34 YEAR OLD GAY MAN...

"The unknown, not knowing when or if things will ever go back to normal."

Mental health

Many LGBTIQ+ people shared concerns about their deteriorating mental health. Contributing factors to worsening mental health included the effects of social isolation, the consequences of being stuck at home in tense, unsupportive or even unsafe environments, and anxiety for the future. Mental health is further discussed at 2. *Mental health* below.

45-54 YEAR OLD STRAIGHT TRANS WOMAN...

"Struggling with my own sanity - depression, anxiety & suicidal ideation - very disappointed in the lack of support by most people in my life."

25-34 YEAR OLD BISEXUAL TRANS WOMAN...

"Worrying my stress, anxiety and depression will end me and all the progress I made in the last 11 months will fall apart."

55-64 YEAR OLD LESBIAN...

"I'm struggling with the stress caused by my emotionally abusive spouse who is spending more time at home due to social restrictions."

Nothing

1 in 20 LGBTIQ+ people indicated that they personally were not worried or struggling with anything in relation to COVID-19 or the response to it. However, some of these people were concerned about the struggles of others.

Confusing and inconsistent messages

Many LGBTIQ+ people are struggling with conflicting messaging from the government in relation to the COVID-19 restrictions. Either they were confused by the restrictions, or they were concerned that others had been (leading to a lack of compliance). Some respondents were also worried about the spread of misinformation during the pandemic, such as conspiracy theories regarding the origins of COVID-19.

PARTICULAR WORRIES AND STRUGGLES

Some themes were raised by a smaller number of LGBTIQ+ people but had notably profound effects for those who were impacted. These are some of them.

Border closures

Some LGBTIQ+ people are significantly affected by border closures, particularly those who are separated from a partner living in a different state, or overseas. Border closures are further discussed at 7. *Border closures and familial separation* below.

Education

LGBTIQ+ teachers and education spoke of the unique uncertainties and difficulties they have faced in the current climate, including concerns that they would contract the virus while teaching, or that they would infect the (in some cases, vulnerable) people that they live with. LGBTIQ+ students are concerned about the impacts of COVID-19 on their study, and difficulties that they have experienced in adjusting to online learning.

UNDER 18 YEAR OLD LESBIAN...

"From the perspective of a year 12 student it is a really tricky situation. Many of us feel thrown about especially by VCAA, many statements were made however none of them concrete causing lots of confusion. The wellbeing of both students and teachers has dramatically suffered."

18-24 YEAR OLD QUEER NON-BINARY PERSON...

"My uni... has been pretty bad with the response. Online classes are hard to engage with and are of a lower quality, students don't feel heard by the uni re: COVID, and the uni is holding online exams which use invasive software. It is hard to find motivation for uni as well because everything is so uncertain."

Healthcare access

Some LGBTIQ+ people have avoided treatment or had their treatment delayed due to COVID-19. Access to healthcare is further discussed at 4. *Access to healthcare* below.

25-34 YEAR OLD QUEER WOMAN...

"needing health services but don't want to go to hospital due to increased risk of corona and not wanting to put pressure on services"

Other

LGBTIQ+ people who responded to our survey also provided firsthand experience of several other impacts, some of which are further explored below. These included experiences of domestic violence, ineligibility for financial

support due to temporary migrant status, increased carer responsibilities, not being able to visit older people for whom they cared for, and young people facing moving back home to unsafe environments.

PARTICULAR ISSUES

1. EMPLOYMENT AND FINANCIAL IMPACTS

Like many other people in Australia, LGBTIQ+ people have experienced loss of work and income due to COVID-19 and its associated restrictions. However, COVID-19 alone is not sufficient in explaining employment disparities for LGBTIQ+ people. In particular, trans and gender diverse people report high rates of unemployment both *before* and *after* COVID-19. These employment disparities have not been met with an adequate response from the Australian Government and there is considerable apprehension among LGBTIQ+ people regarding financial issues, including a removal or reduction in government income support before the economy (and their job prospects and financial situation) fully recovers.

(a) Employment and unemployment pre and post COVID-19

We asked LGBTIQ+ people to indicate the impact of COVID-19 and its associated restrictions on their employment status and income situation. We received respectively 2,552 and 2,487 responses from LGBTIQ+ people in Australia to our questions regarding their pre and post COVID-19 employment status and income situation.

TABLE 2: CHANGE IN EMPLOYMENT AND INCOME SOURCE PRE AND POST COVID-19

Note: Figures are reported by the number of people and by the number of people as a percentage of the total people who responded to the question. Percentages are rounded to the nearest 0.1%. Multiple responses allowed (e.g. a person may be both working part time *and* studying etc.).

EMPLOYMENT AND INCOME SITUATION	PRE COVID-19		POST COVID-19		CHANGE	
Working for an employer full time	984	38.6%	843	33.9%	-141	-4.7%
Working for an employer part time	323	12.7%	298	12.0%	-25	-0.7%
Working for an employer casually	328	12.9%	200	8.0%	-128	-4.8%
Performing unpaid domestic or caring duties	118	4.6%	108	4.3%	-10	-0.3%
Working in an unpaid role / volunteering	184	7.2%	128	5.1%	-56	-2.1%
Working as a contractor / sole trader	213	8.3%	124	5.0%	-89	-3.4%
Running my own business	192	7.5%	144	5.8%	-48	-1.7%
Working in a family business	12	0.5%	14	0.6%	2	0.1%
Studying	423	16.6%	357	14.4%	-66	-2.2%
Unemployed and/or looking for work	192	7.5%	316	12.7%	124	5.2%
Retired	252	9.9%	247	9.9%	-5	0.1%
Receiving some form of government income support e.g. Aged Pension, Disability Support Pension, Newstart	364	14.3%	445	17.9%	81	3.6%
Receiving income from rent e.g. private rental or holiday accommodation	55	2.2%	47	1.9%	-8	-0.3%
Receiving income from superannuation	107	4.2%	121	4.9%	14	0.7%
Receiving income from other investments	66	2.6%	58	2.3%	-8	-0.3%

EMPLOYMENT AND INCOME SITUATION	PRE COVID-19		POST COVID-19		CHANGE	
	Count	Percentage	Count	Percentage	Count	Percentage
Other ³	101	4.0%	143	5.7%	42	1.8%
Total people responding to this question	2,552		2,487		N/A	

Our survey findings suggest that, except for those who are working for a family business, the number of LGBTIQ+ people working or owning a business has fallen considerably due to COVID-19. Since the COVID-19 restrictions were introduced (i.e. 13 March 2020), the proportion of LGBTIQ+ people employed full time or casually has fallen (a reduction of 4.7% and 4.8% respectively). Similarly, the proportion of LGBTIQ+ people working as contractors / sole traders has fallen 3.4%. Meanwhile, the proportion of LGBTIQ+ people who indicated that they were unemployed or looking for work increased from 7.5% pre COVID-19 to 12.7% post COVID-19.

Because our survey sought responses from people of any age, we also analysed the unemployment result for LGBTIQ+ people who were aged 25 to 64 years. The proportion of LGBTIQ+ people aged 25 to 64 years who indicated that they were unemployed or looking for work increased from 6% pre COVID-19 to 10.8% post COVID-19, an increase of 4.8%.

65+ YEAR OLD LESBIAN WOMAN...

"I have lost all my income from 3 separate casual jobs. I have not received any government allowance."

25-34 YEAR OLD GAY MAN...

"I was working full time hours (as a contractor for another company) – but employed as a casual through labour hire. I lost my job when the company ended all the contractors employment. I had already been working from home for about 2 weeks when they ended my employment."

18-24 YEAR OLD BISEXUAL WOMAN...

"I lost my job and have no source of income. I've had to move back in with my mum as I'm unable to support myself until I find new work. I've taken on unpaid volunteer work to try to maintain a sense of routine and purpose, until I'm able to find new paid work."

For those who have been working through COVID-19, the impact of COVID-19 on their work has been pronounced. Many respondents indicated increased workloads, working from home, reduced income and hours, and greater anxiety and pressure regarding work.

While COVID-19 has undoubtedly had a significant impact on employment for all Australian workers, the survey results also suggest disparities in employment for LGBTIQ+ people. With a national unemployment rate of 5.2% in March 2020 (until it jumped to 6.2% in April 2020), LGBTIQ+ people appear to be overrepresented among the unemployed in Australia *both* pre and post COVID-19. In the survey, the proportion of LGBTIQ+ people who

³ Some respondents nominated JobKeeper as an 'Other' income source, meaning that a portion of the 'Other' response may also include forms of government income support that should be considered together with the category 'Receiving some form of government income support'. Accordingly, the responses to these questions will need further analysis and the figures in this table may therefore slightly change in our final report.

indicated that they were unemployed or looking for work was around 2% higher than the national rate pre COVID-19 and is now double the national rate.

When looking specifically at trans and gender diverse people, the rate of unemployment is even more significant. The proportion of trans and gender diverse people who were unemployed or looking for work increased from 15.2% pre COVID-19⁴ to 20% post COVID-19.⁵ For trans and gender diverse people aged 25 to 64 years, those who were unemployed or looking for work increased by an almost identical amount, from 10.5% pre COVID-19⁶ to 15.2% post COVID-19⁷. Both figures are well above the national rate of unemployment.

In other words, COVID-19 and its associated restrictions are not enough to explain the disparity in unemployment rates for LGBTIQ+ people. There is an underlying issue of unemployment in the LGBTIQ+ population, with trans and gender diverse people particularly affected.

55-64 YEAR OLD TRANS WOMAN...

“Housing security, poverty, inability to afford or get help for my numerous health conditions. Surviving in the future. Surviving in old age. Low quality of life. High survival stress. I am in dire financial straights [sic] and going downhill. Desperately need some part time casual work. Now with so much unemployment I'll struggle to get a job being [a] not so well transgender woman.”

The overrepresentation of LGBTIQ+ people in some industries which have been heavily impacted by COVID-19 may explain some of the differential impact of COVID-19 on LGBTIQ+ people's employment, but it does not explain it all. When compared with ABS estimates on the proportion of Australian workers employed by industry,⁸ our survey responses (n=1760) suggest that LGBTIQ+ may be overrepresented in some industries heavily impacted by COVID-19, such as arts and recreation and professional services, and underrepresented in some industries which have seen arguably lesser immediate impacts, such as primary industries, mining, construction and manufacturing. But LGBTIQ+ people also appear to be overrepresented in several industries which have not seen great job losses during COVID-19, such as education, and healthcare and social assistance. So, while LGBTIQ+ people may be overrepresented in some industries which have been among the most significantly impacted by COVID-19 restrictions, these differences are not so pronounced as to explain the greater disparity in unemployment rates overall. This suggests that other factors – such as discrimination – may also be at play.

(b) Income pre and post COVID-19

COVID-19 has also changed the sources of income received by LGBTIQ+ people. The proportion of LGBTIQ+ people receiving some form of government income support or income from superannuation has increased, while the proportion receiving rental and investment incomes has fallen. There has been an approximately 3.6% increase in people receiving government income support since the COVID-19 restrictions were introduced.

More significantly, ignoring any COVID-19 related government relief payments such as JobKeeper, approximately 31% of LGBTIQ+ people report having lost some or all of their income due to COVID-19. Out of 2,448 responses,

⁴ Out of 486 responses, 74 trans and gender diverse respondents indicated they were unemployed or looking for work pre COVID-19.

⁵ Out of 479 responses, 96 trans and gender diverse respondents indicated they were unemployed or looking for work post COVID-19.

⁶ Out of 353 responses, 37 trans and gender diverse respondents aged 25 to 64 years were unemployed or looking for work pre COVID-19.

⁷ Out of 335 responses, 51 trans and gender diverse respondents aged 25 to 64 years were unemployed or looking for work pre COVID-19.

⁸ See Penny Vandenbroek (2019) [Snapshot of employment by industry, 2019](#), Australian Parliamentary Library: Canberra.

439 (17.9%) LGBTIQ+ people indicated having lost more than half or all of their income due to COVID-19 and its associated restrictions. A further 320 (13%) reported having lost less than half of their income.

Not all the people who have lost income reported accessing government support. While 759 people reported having lost some or all of their income due to COVID-19, only an additional 81 (10.6%) people indicated receiving some form of government income support post COVID-19. A few LGBTIQ+ people also dipped into their superannuation to bolster their income.

18-24 YEAR OLD BISEXUAL WOMAN...

"I have no income and no real prospect for work for the foreseeable future. I am finding it difficult to access financial aid from Centrelink and have no means to support myself. I've lost all sense of independence and confidence in my abilities. My mental health issues of depression and anxiety have exacerbated and I find it difficult to afford or access appropriate psychology treatments to help me... My career is in limbo and any means for me to find meaningful full-time paid work in the arts is gone for what could be months, if not years."

25-34 YEAR OLD LESBIAN...

"I'm struggling with being in the grey zone of employment and benefits. My company doesn't qualify for jobkeeper, yet I've not made income for two weeks now. I can't get jobseeker unless I quit my job, but I don't want to quit because before COVID-19 it was very stable for the past 3 years. I'm struggling with money and not knowing what to do."

Looking then at the real change in actual monthly income, LGBTIQ+ people have experienced a reduction in their monthly income after tax, even after income from government support is included. There are now a greater number of no to low-income earners among the LGBTIQ+ population, with a reduction in the number and proportion of middle- and high-income earners. A significant degree of that movement has been an increase in the proportion of people reporting nil or negative income post COVID-19, noting however that the survey was open between 24 April 2020 and 18 May 2020 (with JobKeeper payments commencing in the first week of May).

TABLE 3: CHANGE IN MONTHLY INCOME (FROM ANY SOURCE) PRE AND POST COVID-19

Note: Figures are reported by the number of people and by the number of people as a percentage of the total people who responded to the question. Percentages are rounded to the nearest 0.1%.

MONTHLY INCOME AFTER TAX	PRE COVID-19		POST COVID-19		CHANGE	
Nil	142	5.6%	245	10.1%	103	4.4%
\$1-1,999	310	12.3%	307	12.6%	-3	0.3%
\$1,000-1,999	185	7.3%	188	7.7%	3	0.4%
\$2,000-2,999	317	12.6%	332	13.6%	15	1.1%
\$3,000-3,999	346	13.7%	299	12.3%	-47	-1.5%
\$4,000-4,999	333	13.2%	274	11.3%	-59	-2.0%
\$5,000-5,999	223	8.9%	181	7.4%	-42	-1.4%
\$6000 +	419	16.6%	324	13.3%	-95	-3.3%
Negative income	16	0.6%	27	1.1%	11	0.5%

MONTHLY INCOME AFTER TAX	PRE COVID-19		POST COVID-19		CHANGE	
Don't know / unsure	82	3.3%	105	4.3%	23	1.1%
Prefer not to say	145	5.8%	152	6.2%	7	0.5%
Total	2518		2434		NA	

18-24 YEAR OLD QUEER HOSPITALITY EMPLOYEE IN REGIONAL QUEENSLAND...

"I'm at risk of becoming homeless because my roommates and I can't afford rent."

35-44 YEAR OLD GAY MAN, NOW UNEMPLOYED...

"I'm more despondent every day... It's destroyed my livelihood. It's robbed me of my independence. I worked in a low paying industry... I can barely make ends meet, and I'm an adult gay man living with his mother again and with no meaningful context with friends. And honestly, fuck Zoom. Video communication sucks."

(c) Concerns about financial issues

Given the results above, it is not surprising that survey respondents commonly raised financial issues as something they were worried about or struggling with when thinking about COVID-19 and the government and community response to it. Just over 1 in 10 LGBTIQ+ people mentioned financial issues, such as loss of income, employment and concerns regarding future employment, in response to an open question regarding their COVID-19 related worries and struggles.

In among the concerns about the economic fall-out from COVID-19, LGBTIQ+ people expressed strong concerns about economic equality. For example, respondents reflected on what they saw as inadequate financial support forming part of the government response, particularly for casual workers, people on temporary visas and people on the Disability Support Pension. There was also a concern regarding future austerity, especially the rolling back of financial support before the economy (including job prospects and employment) fully recovers. Uncertainty was also a source of worry; people do not know the path forward and therefore cannot plan accordingly.

55-64 YEAR OLD GAY MAN...

"I struggle the most with the loss to our super/savings as I plan to retire by the end of the year to care for my husband [who has a degenerative medical condition]. I am worried how we will get on financially. Flattening the curve only ensures a hospital bed, if needed. Until herd immunity is achieved, I fear the virus..."

65+ YEAR OLD TRANS WOMAN...

"I'm [over 75 years old] and my very small superannuation has taken a hit leaving me wondering if I will have to die on the job."

55-64 YEAR OLD GAY MAN...

"My business turnover dropped from \$130K per month on average to nil. I had to make several quick decisions to minimise my expenses so that I can successfully hibernate my business and prepare for the future. I am still working on my business, going through all our systems, cutting costs wherever I can and managing impacted and cancelled travel arrangements."

25-34 YEAR OLD BISEXUAL WOMAN...

"My partner lost most of their income after COVID-19 but was ineligible for Jobkeeper payments. I am worried about us paying rent. I think there were too many gaps in eligibility for Jobkeeper. I am also extremely worried about Australia's arts sector and how it will survive this crisis without government support."

35-44 YEAR OLD TRANS WOMAN...

"Disability pension hasn't been increased, but prices at supermarkets have increased. Harder to make ends meet. Harder to get basic groceries. Also some lines not available (RC Home brand) so have to buy more expensive brand. Financial stress increasing."

(a) Key take outs for Australia's response to COVID-19

There is a need for a broader employment strategy for getting people in Australia back to work, and that employment strategy must redress barriers to employment, particularly for trans and gender diverse people.

Financial issues are a significant concern for many LGBTIQ+ people. That does not necessarily mean there is a desire to open up the economy in a way which poses a greater risk to people's health, as many respondents were concerned about removing restrictions too early and/or increasing the spread of COVID-19.

However, it does mean that people would be assisted by:

- The continuation of existing financial support if they are unable to obtain employment due to COVID-19;
- The expansion of financial support to people who are currently ineligible for it; and
- More certainty regarding the Australian Government's plan going forward, so they can plan accordingly.

2. MENTAL HEALTH

COVID-19 and its associated restrictions have had a significant impact on the mental health of LGBTIQ+ people. In particular, COVID-19 has exacerbated existing disparities in mental health outcomes for LGBTIQ+

people who already faced disproportionately high rates of depression, anxiety and suicidality.⁹ This elevated need for mental health support has not been met with an adequate response from the Australian Government.

(a) Mental health challenges due to COVID-19

Out of 2,568 LGBTIQ+ survey respondents who responded to the question of whether they had a disability or chronic health condition, 343 (13.4%) people voluntarily described having a mental health issue such as depression or anxiety (whether alone or in combination with a physical health condition).

When asked (in an open question) to identify anything they were struggling with or which worried them related to COVID-19, almost 1 in 10 LGBTIQ+ people identified mental health.

This suggests that COVID-19 and its associated restrictions have exacerbated underlying mental health disparities in the LGBTIQ+ population, making those who already live with depression, anxiety and other mental health issues more prone to adverse mental health outcomes as a result of COVID-19 and its associated restrictions.

45-54 YEAR OLD GAY MAN...

"I am lost at the moment but hope to get through it..."

65+ YEAR OLD LESBIAN, REGIONAL VICTORIA...

"My main problem is depression and being isolated from my local active and caring lesbian community."

35-44 YEAR OLD QUEER WOMAN...

"My wife has lost her job and feels very disconnected from her beloved family and queer friends overseas. She is quite depressed. Our overall burden of unpaid work has increased significantly due to homeschooling, which also puts a strain on us. I worry that we will have a lot of anxiety regarding leaving the house and connecting with people face to face again, but also worry my wife will be isolated long term and this will negatively affect her."

18-24 YEAR OLD NON-BINARY REGIONAL QUEENSLANDER...

"I am worried that I or my friends and family won't make it. Or that the damage this is doing to my mental health will mean the progress I had made has been entirely erased."

Further, while a high proportion of all LGBTIQ+ respondents were inclined to report feeling more lonely and/or low or flat because of the COVID-19 restrictions, those with pre-existing mental health issues were significantly more likely to do so.

⁹ COAG Health Council (2017) [Fifth National Mental Health and Suicide Prevention Plan](#), p 6.

For example:

- Out of 2,440 responses, 1,578 (64.7%) LGBTIQ+ people 'strongly agreed' or 'agreed' that they felt 'more lonely now because of the COVID-19 restrictions'. For those who reported a mental health issue, the proportion agreeing was even higher at 80% (and 75% for those reporting both a mental health issue and physical health condition).
- Out of 2,440 responses, 1,609 (65.9%) LGBTIQ+ people 'strongly agreed' or 'agreed' they felt 'low or flat because of the COVID-19 restrictions'. For those who reported a mental health issue, the proportion agreeing was higher at 79% (and 77% for those reporting both a mental health issue and physical health condition).
- Out of 2,430 responses, only 745 (30.7%) LGBTIQ+ people 'strongly agreed' or 'agreed' that they felt 'confident about the future'. For those who reported a mental health issue, that proportion was lower by half. Only 13% of LGBTIQ+ people who reported a mental health issue and 17% of LGBTIQ+ people who reported both a mental health issue and a physical health condition, 'strongly agreed' or 'agreed' to feeling confident about the future.

Several other segments of the LGBTIQ+ population also appear more likely to have felt 'more lonely' or 'low or flat' because of COVID-19 restrictions. For example, those aged 24 years and under, trans and gender diverse people, First Nations' people and people with Asian¹⁰ cultural and ethnic identities were more likely to 'strongly agree' or 'agree' with the statement regarding loneliness. These groups were also more likely to 'strongly agree' or 'agree' with the statement regarding feeling low or flat. People aged 24 years and under had particularly high rates, with 88% (288 out of 327) agreeing or strongly agreeing to feeling more lonely and 83.5% (273 out of 327) agreeing or strongly agreeing to feeling low and flat. Meanwhile, people aged 65 and over and people living alone were not more likely to do so.

A number of people who responded to our survey are in a very dark place right now. Depression, anxiety, stress and suicidal feelings were among the themes raised by some respondents. The compounding of several factors, such as disability, financial insecurity, isolation or pre-existing mental health issues, contributed to a very high degree of vulnerability.

18-24 YEAR OLD QUEER TRANS MAN...

"I feel very sad and scared. I feel very unfulfilled and lonely. I am very afraid that I will not be okay through this."

25-34 YEAR OLD GAY MAN...

"Motivation to look after myself is waning very quickly - need to stop drinking so much, need to eat better and exercise more."

¹⁰ Asian includes those who identified as Asian, South Asian, South East Asian, as well in reference to particular countries in Asia (e.g. Chinese, Indian, Japanese), whether alone or with other ethnic and cultural identities such as 'Australian'.

45-54 YEAR OLD GAY MAN...

"Mental health issues - I relied on my gym to keep my mental health stable, but its closure worsened my depression."

55-64 YEAR OLD GAY MAN, RETIRED, REGIONAL NSW...

"My freedom is important to me. I feel like I'm trapped or in gaol. It's causing me anxiety and depression and self harm which I have never done before. It's the fact that there's no end in sight and even if there were my trust for the community has plummeted. I don't think things will ever be the same again."

(b) LGBTIQ+ people have been excluded in the mental health response

On 15 May 2020, the Australian Government announced \$48.1 million in funding for a national mental health and wellbeing pandemic response plan.¹¹ Among the funding announced as part of the plan was \$29.5 million for vulnerable groups, identified as older Australians, culturally and linguistically diverse communities, carers of people with mental illness and Indigenous communities. Despite a request from LGBTIQ+ community organisations for more funding to deal with an increased demand for their mental health services, LGBTIQ+ people were not included as a vulnerable group in the mental health response plan. LGBTIQ+ people have been largely absent in the Australian Government's mental health response to COVID-19.

55-64 YEAR OLD LESBIAN...

"I am normally very isolated. The only social activity I had was to go for a coffee in a cafe. Can't do that now. I'm alone 24/7. That's not entirely due to lockdown. It's to do with having depression and the social withdrawal that results from that. I struggle more during the winter months. I attempted to take my life a few years ago and I'm concerned I may not make it through this winter."

(c) Key take outs for Australia's response to COVID-19

COVID-19 is exacerbating mental health disparities among LGBTIQ+ people. Those disparities are being amplified in an environment of increasing financial stress, social isolation, and entrapment in unsupportive home environments. Despite overwhelming evidence of the mental health disparities, Australia's COVID-19 mental health response has not provided any funding or additional support to LGBTIQ+ organisations delivering mental health support to LGBTIQ+ people. Funding is needed to support LGBTIQ+ organisations who are supporting the mental health of LGBTIQ+ people at this time. Additionally, it is important that LGBTIQ+ people are included in suicide prevention initiatives. An additional \$10.3 million for suicide prevention research was announced on 25 May 2020.¹² The research will address suicide in boys and men and internet-based responses to suicide prevention, but it is not clear to what extent that research will address disproportionately high rates of suicide in LGBTIQ+ populations.

¹¹ Minister for Health, Chief Medical Officer and CEO of the National Health Commission, '[COVID-19: \\$48.1 Million for National Mental Health and Wellbeing Pandemic Response Plan](#)', Media Release, 15 May 2020.

¹² The Hon Greg Hunt MP, Minister for Health, '[Additional \\$20 million for Mental Health and Suicide Prevention Research](#)', 25 May 2020.

3. SAFETY AT HOME AND FAMILY VIOLENCE

COVID-19 restrictions have added to the fears of LGBTIQ+ people who do not feel safe at home, including those who fear or have experienced domestic violence. LGBTIQ+ young people, and trans and gender diverse people, were over-represented among those who feared or had experienced violence from someone they lived with. Family violence against LGBTIQ+ people is just as likely to come from family members as it is a spouse or partner, demonstrating that a lack of acceptance of sexuality and gender diversity continues to cause some of the family violence experienced by LGBTIQ+ people. Addressing family and domestic violence against LGBTIQ+ people requires a sustained plan which goes beyond the immediate response to COVID-19.

(a) Not all LGBTIQ+ people feel safe at home

Out of 2,425 responses, 175 (7.2%) LGBTIQ+ people 'disagreed' or 'strongly disagreed' with the statement 'I feel safe at home'. Of the 175, 46 indicated that they lived on their own with no other people, while 25 were parents with 14 having children living with them. First Nations' LGBTIQ+ people were particularly overrepresented among those respondents who indicated they did not feel safe at home. LGBTIQ+ people who reported mental health issues were also less likely to feel safe at home.

35-44 YEAR OLD LESBIAN MUM WHO DIDN'T FEEL SAFE AT HOME...

"Impacts of domestic violence from someone I do not currently live with causes concern. [T]he increased contact of drop offs/pick ups, controlling behaviour due to COVID (accusations that I place kids at risk, refusal to return kids on schedule) and the lack of usual supports and contact has been isolating and made me anxious. [T]he uncertainty around COVID is compounded by a lack of certainty around existing parenting arrangements. ... My kids are struggling and I worry about the impact on them, having observed increased bed wetting..."

(b) Domestic and family violence

In an effort to understand better whether people's feelings of safety at home may be impacted by experiences of domestic violence, we asked people about domestic violence they had experienced in the last 12 months or if they lived with someone whom they feared may be violent, abusive or controlling towards them.

Domestic violence in the last 12 months. Out of 2,427 responses, 195 (8%) LGBTIQ+ people had experienced violence, abuse, harassment or controlling behaviour in the last 12 months from someone they currently live with. Of those 195 people, 48 (24.6%) people indicated that they lived only with a spouse/partner (with or without children) and 57 (29.2%) people indicated that they lived with their parents (with or without other family members, but not including a spouse/partner).

18-24 YEAR OLD BISEXUAL WOMAN...

"I am most concerned about job security. Since lockdown I feel more scared and lonely as I am forced to live with powerful homophobic family members who do not accept my LGBTIQ identity. My job insecurity has prevented me from leaving. I used to be able to go out with my friends and meet other queer people so I could manage this, but now I can't do that. I used to see counsellors or have phone counsellors but I am scared to speak on the phone incase my family hears me."

18-24 YEAR OLD TRANS MAN IN QUEENSLAND...

"I lost my job and as a result lost my rental and I now live with my transphobic family who do not accept me and are emotionally, verbally and at times physically abusive."

Fear of domestic violence. Out of 2,429 responses, 132 (5.4%) LGBTIQ+ people reported currently living with someone they feared may be violent, abusive or controlling towards them. Of those 132 people, 38 (28.8%) people indicated that they lived only with a spouse/partner (with or without children) and 51 (38.6%) indicated that they lived with their parents (with or without other family members, but not including a spouse/partner).

Additionally, 114 LGBTIQ+ people responded 'yes' to both questions regarding past domestic violence and current fear of domestic violence.

25-34 YEAR OLD BISEXUAL WOMAN...

"I live with a toxic and abusive family. Prior to COVID 19, my main way of staying positive was to leave the house and see my friends. My friends are my chosen family. They love and support me, and remind me that I'm not the terrible person that my biological family make me feel that I am. Without this lifeline, and being in lockdown with my family, I feel trapped and alone. I need to be able to see my friends ASAP."

The survey results suggest that, for LGBTIQ+ people, family and domestic violence is at least as likely to come from family members as it is a spouse or partner. In both measures, young LGBTIQ+ people (those under 24 years) are particularly at risk, accounting for approximately one third of those reporting domestic violence in the last 12 months or currently living with someone whom they fear will be violent, abusive or controlling towards them. Trans and gender diverse people are also at particular risk, accounting for approximately one third of those reporting domestic violence in the last 12 months and approximately 39% of those currently living with someone who they fear will be violent, abusive or controlling towards them.

55-64 YEAR OLD QUEER WOMAN REFLECTING ON HER WORRIES/STRUGGLES...

"Having to move back in with my ex-partner due to COVID19... Future financial hardship."

Several of the respondents who reported past experiences of domestic violence and/or a current fear of domestic violence identified a link between the situation in which they find themselves and financial instability due to COVID-19. These respondents also reflected on restrictions to movement and/or contact, as well as mental health issues, as contributing to their worries or struggles. For many respondents, uncertainty – for example, about their financial situation, the government's response or the easing of restrictions – contributed to their worries and struggles. When asked whether they had seen or accessed any services or support which have helped them, several respondents referred to accessing support and services from organisations such as LGBTIQ+ organisations (e.g. ACON), Headspace, unfunded online support groups, or their health practitioners (such as GPs, psychologists), including through telehealth. One person noted using 1800Respect.

(a) Key take outs for Australia's response to COVID-19

For the approximately 1 in 20 LGBTIQ+ people who are feeling unsafe or at risk at home, the COVID-19 restrictions have had a particularly harsh impact. LGBTIQ+ people who have escaped unsupportive family environments have had to return to those environments following COVID-19 related job losses, while those currently living in unsafe environments have had fewer avenues of support and escape with COVID-19 restrictions in place.

Addressing domestic and family violence for LGBTIQ+ people will require a government response which goes well beyond COVID-19. It requires at least:

- ensuring financial security and independence for people seeking to escape violence;
- ensuring mainstream service providers are inclusive and welcoming of LGBTIQ+ people and equipped to respond to LGBTIQ+ people who experience domestic and family violence;
- funding specialist family violence services that are operated by LGBTIQ+ community organisations for the LGBTIQ+ community;
- measures directed at primary prevention and primary drivers of violence, including addressing prejudice towards LGBTIQ+ people that continues to inform the domestic and family violence experienced by some LGBTIQ+ people;
- funding research into LGBTIQ+ family and domestic violence and the effectiveness of responses;
- ensuring laws and policies support LGBTIQ+ inclusive service delivery, including by removing exemptions in anti-discrimination legislation allowing faith-based service providers to discriminate based on sexual orientation, gender identity and intersex status.

Victoria has already made some progress in this area. In Victoria, 19 family violence service providers have been working towards achieving 'Rainbow Tick' accreditation, which supports inclusive service delivery for LGBTIQ+ people who experience family and domestic violence.¹³ Among those are 10 faith-based family violence service providers, who have jointly pledged their commitment to ensuring inclusive and non-discriminatory service delivery.¹⁴ In preparation for accreditation, all family violence service providers have been funded to undertake LGBTI inclusion training,¹⁵ and in September 2018, a specialist LGBTIQ family violence service was established.¹⁶

4. ACCESS TO HEALTHCARE

COVID-19 and its associated restrictions has increased barriers to accessing healthcare services for LGBTIQ+ people. These barriers have compounded existing healthcare barriers, such as a concern regarding the availability of non-discriminatory healthcare services, particularly for trans and gender diverse people.

(a) Delays in treatment

Several trans and gender diverse people noted that interstate and overseas travel restrictions, and the suspension of 'elective' surgeries, delayed their access to gender affirming treatment. While several of these people understood the reasons for the travel restrictions or the delays, they nonetheless noted that delaying these treatments (and uncertainty over when and how they could proceed) caused them considerable distress.

¹³ Victorian Department of Premier and Cabinet (2019) [Three Years On From The Royal Commission Into Family Violence](#), p. 58.

¹⁴ The organisations include: Anglicare Victoria, Vincent Care Victoria, Good Shepherd Australia New Zealand, Salvation Army, McAuley Services for Women, Jewish Care, MacKillop Family Services, Uniting (VicTas) Church, Sacred Heart Mission and Good Samaritan Inn. Id, p. 61.

¹⁵ Id, p. 60.

¹⁶ Id, p. 61.

35-44 YEAR OLD TRANS WOMAN...

"The international travel bans have caused my gender reassignment surgery to be delayed, and I worry about whether it will be possible after or I'll need to look for a new surgeon in Australia, though it's completely understandable under the circumstances and better to wait and isolate until the virus is no longer so dangerous one way or another."

35-44 YEAR OLD TRANS LESBIAN...

"My transition surgery was cancelled / postponed by up to six months (or possibly more), which has significantly impacted my mental health."

(b) Avoiding treatment

The fear of contracting COVID-19, coupled with restrictions on face-to-face contact, have compounded with existing anxiety regarding the availability of welcoming and affirming healthcare services. These together have reduced access to healthcare services for LGBTIQ+ people.

People are simply not accessing the healthcare services they need because of fear. Telehealth pathways, while welcome, have not addressed underlying concerns regarding discrimination in healthcare settings.

35-44 YEAR OLD NON-BINARY QUEENSLANDER...

"I'm worried about needing to go to hospital if I get covid19. There is a delay at the moment getting my medicare card in my new name. I can't handle being called that name again, especially if I'm really sick - I will not go and just risk dying. I'm at peace with that decision now, but it's awful I had to consider this. I've also been putting off going to my GP for other health needs until my name is changed. My GP clinic said they can't change my name without a new medicare card. I'm in a bind. I know I'll spiral back to being suicidal if I need to use that name again, but my need for medication is getting closer to urgent."

25-34 YEAR OLD QUEER MAN IN REGIONAL QUEENSLAND...

"I'm struggling with my anxiety, I don't have a mental health plan and I don't feel that the GPs are a safe enough place to go and get one put in place to allow for Telehealth consultations."

These fears are being further stoked by concerns about provisions in the Religious Discrimination Bill which support health professionals who wish to refuse medical treatment on religious grounds.

18-24 YEAR OLD GAY TRANS MAN...

"I worry about the looming Religious Discrimination Bill, and as a consequence, I cannot believe any of the government's comments about everybody deserving access to healthcare. If the bill is passed before COVID-19 is fully controlled, will I (as a trans male) be able to get sufficient treatment? According to the bill, I can be turned away if the medical "professional" claims to be religious, and takes issue with my existence. That is stressful."

(c) Key take outs for Australia's response to COVID-19

While restrictions on surgeries have eased, trans and gender diverse people remain unable to access gender affirming treatments with border closures preventing them accessing specialists overseas and interstate. Meanwhile concerns regarding COVID-19 have compounded existing fears of discrimination in healthcare settings. There is a need for a public education campaign encouraging and giving comfort to people to seek the healthcare they need despite COVID-19 and a specific strategy to tackle discrimination (and the perception of it among LGBTIQ+ people) in healthcare. Accessible arrangements must be put in place and communicated to allow people to travel overseas and interstate for medical treatment.

5. DISABILITY AND CARE NEEDS

LGBTIQ+ people with disability and those who need personal or domestic care have been exceptionally and adversely affected by COVID-19. We support calls by People with Disability Australia and others for people with disability to be included in all COVID-19 response plans and welcome the establishment of a COVID-19 advisory committee for people with a disability.

(a) Access to care needs

Out of 2,568, 872 (34%) LGBTIQ+ people identified themselves as having a disability or chronic health condition. However, a smaller proportion identified having personal or domestic care needs.

Out of 2,574 responses, 232 (9%) LGBTIQ+ people identified themselves as needing someone to assist them with personal or domestic tasks. Of those people, 183 (approx. 78%) reported receiving personal or domestic care prior to COVID-19.

Approximately half of LGBTIQ+ people receiving personal or domestic care do so from people who do not live with them. Of 183 LGBTIQ+ people receiving personal or domestic care, 96 (52.5%) received it from someone who lived with them, 74 (40.4%) received it from someone who did not live with them, and 13 (7.1%) received it both from someone who lived with them and someone who did not.

Of the 183 people who received personal or domestic care, 84 (45.9%) reported that COVID-19 and its associated restrictions had affected their ability to get the care they need, while 81 (44.3%) reported that COVID-19 and its associated restrictions had increased their care needs.

The impact of not being able to access care has been profound and immediate for people that need that care.

35-44 YEAR OLD QUEER WOMAN...

"Without access to physio and hydro and massage my [condition] is in an awful flare and the muscles in my neck have tightened so much they have pulled my shoulders out... I have had spasms in my back... I keep [dislocating joints] and without the pool to move without weight on it, it's hard to get it back in. Most of my joints are playing up without any help. This makes everything harder to do. It means I need more help with every day tasks and means I am less capable of helping my partner with her mental health issues. Because of the health backslide I am not able to bathe as often as I'd like so I have more skin problems than usual with skin tearing and cysts. We haven't been able to cook as well or as often as we'd like so I have put more weight on eating food that is easy to grab and available ([certain dietary needs are] ... hard to find when everyone is panic buying) which puts more pressure on my joints and makes things harder. The fall out will last much longer than lock down."

55-64 YEAR OLD QUEER PERSON, LIVES ALONE...

"I had to stop my rehab program and hydro therapy. Could not get domestic help. No garden help. No help at all. It's been very hard. My health has suffered enormously and I am getting sicker."

55-64 YEAR OLD QUEER WOMAN, LIVES ALONE WITH ASSISTANCE ANIMAL...

"I can't get lifts to the shops and doctors etc. It was a major problem feeding myself until the supermarkets resumed deliveries to vulnerable people."

35-44 YEAR OLD LESBIAN, LIVES ALONE...

"I need cooking but can't and have not been able to eat properly."

Among the reasons cited for not being able to access care include COVID-19 restrictions and social distancing guidance, the risk of contracting COVID-19, the increased needs of others (such as children), panic buying, and the additional cost involved in accessing care and services.

25-34 YEAR OLD GENDERQUEER PERSON...

"I'm struggling with the financial costs, paying for more services than normally needed, support workers, delivery of food/medicine... I have mobility restrictions so eating lunch out means I have to take it home with me or eat as I walk which is frustrating. I'm always worried everytime my allergies play up or I sneeze that I've got the virus and I'm going to die due to the anxiety. This entire covid situation has been very triggering for my ptsd and I know it'll affect me and others for years to come."

45-54 YEAR OLD LESBIAN, LIVES ALONE...

"My cleaner is no longer able to come on a regular basis. This is partly due to social distancing but mainly because her circumstances have changed in that she has to stay home and home school her 3 children."

25-34 YEAR OLD GENDERQUEER PERSON, LIVES ALONE...

"My friends are less available to support me as they are stressed by however [sic] the pandemic is effecting them. So I've needed to hire more payed [sic] support. I'm also needing more care as I'm immune compromised and the medications my doctor has recommended I take to protect me from covid-19 cause some bad side effects."

(b) Key take outs for Australia's response to COVID-19

The impact of COVID-19 on people with disability, particularly those in need of domestic and personal care, has been profound and significant. In April 2020, an advisory committee for people with disability was established to help inform the COVID-19 response. However, our survey results suggest that there is still a lot of work needed to ensure the increased need for support is met and solutions are found for people who rely on assistance through direct contact. People with disability and their advocates must be and remain key architects of the COVID-19 response going forward.

6. CAREGIVING

LGBTIQ+ people have stepped up to support and give care to family and friends through COVID-19. Nearly 1 in 5 LGBTIQ+ caregivers give care to a friend, who is not a partner and not a family member. Some of these caregivers have been discouraged by COVID-19 restrictions framed around 'households' and 'family', showing the importance of communications which speak to the diversity of 'chosen families' in LGBTIQ+ communities.

(a) Caregiving by LGBTIQ+ people

Out of 2,603 responses, 390 (15%) LGBTIQ+ people indicated that they provided unpaid personal or domestic care to another person. Care was most commonly provided to parent(s), followed by partners, children, a friend and another family member.

TABLE 4: WHO DO YOU PROVIDE CARE TO?

Note: Figures are reported by the number of people and by the number of people as a percentage of the total people who responded to the question. Percentages are rounded to the nearest 0.1%. Multiple responses allowed.

CARE PROVIDED TO:	NO.	%
Child	87	23.5%
Partner	95	25.7%
Parent	135	36.5%
Another family member	63	17.0%
Friend	77	20.8%
Total	370	

Around half (53.6 and 48.5% respectively) of the LGBTIQ+ caregivers indicated that COVID-19 and its associated restrictions had affected their ability to provide personal or domestic care, or increased their caring responsibilities.

65+ YEAR OLD LESBIAN...

"My friend is near 80 years old and has major health issues. I have been doing the shopping and trying to get him to not visit the shopping centres."

24-34 YEAR OLD GAY MAN...

"A new homeless gay guy moved into our spare room. International student from [country]. We provide room and some food."

35-44 YEAR OLD QUEER PERSON...

"My sister moved back home who is disabled so requires support, alongside the three other people I was caring for previously. We have stopped all care workers coming in for now who previously assisted with my [other family members]. Each person requires more emotional and psychological support during to lock downs and restrictions."

The reasons provided included social distancing measures, travel restrictions, school closures, border closures, the risk of infection, fear of getting fined or being stopped by police, and restrictions on access (for example, in aged care facilities).

35-44 YEAR OLD GAY MAN, CAREGIVER TO PARENT...

"I spent [a number of] months of last year in [another Australian state] supporting my father in managing his illness and transitioning from living alone and moving into a nursing home. Given my husband and I live and work in Sydney, the travel bans prevent me from physically being in [another Australian state] while the and social distancing mean I couldn't even visit him in the nursing home even if I could travel to [another Australian state]."

35-44 YEAR OLD GAY MAN, CAREGIVER TO FRIEND...

"I don't go as often and when I do, I get very stressed that the police might stop me. Because it's not a traditional family member I worry that they might fine me."

55-64 YEAR OLD LESBIAN, CAREGIVER TO IN-LAWS...

"My elderly parents-in-law who live with us in a granny flat are now isolated due to high risk so we have no physical contact with them. This makes it difficult to support them as we did before and to provide the same level of emotional and social support they need. It has also meant we cannot take them to medical or allied health appointments, shopping, etc reducing their choices. This has affected their mental health as well."

(b) Key take outs for Australia's response to COVID-19

LGBTIQ+ people are caregivers to a range of family and friends who are our 'chosen families'. That caregiving is something we should recognise, support and encourage. One way of doing this is to ensure that COVID-19 restrictions, and communications regarding those restrictions, speak to the diversity of familial and care networks in Australia. While New Zealand opted for inclusive concepts such as 'the people in your bubble', Australia has generally communicated its restrictions by reference to 'households' and 'family' relationships. These have had the effect of making the COVID-19 restrictions harder to understand and implement for caregivers who are not related or living with the people they care for.

7. BORDER CLOSURES AND FAMILIAL SEPARATION

Restrictions on travel, and border closures in particular, have had a negative impact on LGBTIQ+ people with partners and family members interstate or overseas. To give these people certainty, the Australian Government must outline a long-term plan for border closures and support reunification pathways for separate couples and families wherever possible.

(a) Separation of couples and families

Out of 2,623 responses, 1,325 (51%) LGBTIQ+ people reported being in a committed relationship and 213 (8%) indicated they were seeing someone or dating. Of the 1,325 LGBTIQ+ people in a committed relationship, 1,111 (84%) reported living with a spouse or partner. 77 (5%) LGBTIQ+ people in relationships indicated that their partners were living overseas and/or interstate.

A number of respondents with partners living overseas and/or interstate indicated they were worried about or struggling with being physically separated from their partner.

35-44 YEAR OLD GAY MAN...

"My partner of 15 years lives in [Australian state] and I live in Queensland (we had to move separately for work). Normally we try to visit each other at least once every 6 weeks or so. We haven't seen each other since the start of February and who knows when we will see each other again? It is very lonely."

GAY MAN SEPARATED FROM HIS PARTNER OF 7 YEARS...

"I had an application for a Partner Visa for my partner to come to AU. We were notified it was to be decided and then the virus stopped assessments and the borders were closed."

Some respondents were worried about separation from other family members.

45-54 YEAR OLD GAY MAN ...

"I have a brother receiving ... treatment [for a terminal illness]. This is my greatest worry as he is immuno-suppressed and being overseas will impact on family visiting him when he has a terminal illness."

65+ YEAR OLD BISEXUAL MAN IN NSW...

"I would like some idea of when we can travel to see family interstate."

(b) Key take outs for Australia's response to COVID-19

The Australian response to COVID-19 needs to provide separated couples and families with information on reunification pathways if interstate and overseas borders are to remain closed for the longer term. Australian borders should not be closed to family members any longer than is strictly necessary to preserve public health.

8. VIABILITY OF LGBTIQ+ INSTITUTIONS AND COMMUNITY ORGANISATIONS

Safe and affirming queer spaces are critical to the LGBTIQ+ community. There are very few LGBTIQ+ organisations, businesses and venues in Australia, and their ongoing viability is a key concern for the ability of LGBTIQ+ people to re-emerge, as a community, from COVID-19. LGBTIQ+ institutions and community organisations need a strategy, supported by government, to ensure key cultural and community meeting places and organisations survive the crisis.

(a) The LGBTIQ+ sector in Australia

As set out in our earlier report on [COVID-19 and LGBTIQ+ Communities](#), LGBTIQ+ organisations, businesses and venues are important cultural and commercial institutions that provide a place for connection, support, pride and community. They are also sites for spreading important community information, such as safe sex information.

Many of these institutions rely on events income or opening their doors to patrons, and give LGBTIQ+ organisations platforms to meet, fundraise and host events. They are our communities' town halls and squares, our places of congregation, and our cultural and sporting gathering grounds.

While COVID-19 shuts down these venues, their income streams and the opportunity for fundraising events, LGBTIQ+ community organisations will face uncertain economic futures notwithstanding the increased demand for their services as a result of COVID-19.

18-24 YEAR OLD BISEXUAL WOMAN...

"Community spaces are so important for the queer community. I feel like I can be myself fully when I'm not with my community. Most straight cis people don't feel like they need to hide parts of themselves at home. But many queer people do. And it's an awful feeling. My community spaces are where I can turn off the constant worry about what people will think of me and just relax and be myself. I haven't access to that since the March."

25-34 YEAR OLD QUEER WOMAN...

"I am concern about accessing the community (i.e. queer spaces, music venues, libraries, pools, museums) as they are essential to my self-care and identity prior to COVID-19."

18-24 YEAR OLD QUEER NON-BINARY PERSON...

"I really miss being surrounded by queer friends and queer culture, I feel a sort of loss of identity as I am not having it validated as much as I usually would."

25-34 YEAR OLD PANSEXUAL WOMAN...

"Most of my friends are straight, and almost all of them are in long-term monogamous relationships. It's hard to relate to them on so many Zoom chats where they're all lying in bed with their partners, and I'm just sadly swiping Tinder in a regional town with very few queers."

(b) Key take outs for Australia's response to COVID-19

The LGBTIQ+ community relies on a few organisations, businesses and venues to sustain LGBTIQ+ support, culture and community. LGBTIQ+ community organisations are seeing an increase in demand for their services without additional funding, and in an environment that has limited their ability to fundraise due to the ban on gatherings and cultural events. LGBTIQ+ businesses and venues, which in turn provide space and fundraising opportunities for other community institutions and organisations, must operate under restricted capacity. Our organisations, businesses and venues must be part of recovery planning and targeted economic stimulus aimed at preserving key cultural and community meeting places and services.